<u>Indiana State Police Methamphetamine Laboratory Occurrence Report</u> This form complies with the statutory requirement set Rorth in IC 5-2-15-3.

Date:	11/27/2010	Address:	<u>1218 Elm St</u>
Case #;	<u>16F-20128</u>		Rochester, IN 46975
County:	<u>Fulton</u>		
Type of Laboratory Scizure (check one) Operational Lab		Scizure Location (c	Hotel/Motel
	al/Glassware/Equipment (only) te (only)	☐ Outbuilding ☐ Vehicle	Open No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(cbeck all that apply) Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
☐ Flammable Solvents: porach			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
☐ Hydrochloric Acid Gas Generator(s): open air			
Corrosive Acid:			
Corrosiye Base:			
Other (item and location);			
Ycs _ No	er age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrin	<u>c Information</u> e/Pseudoephedrine Tracking Log erchant Tip
This report is to be faxed to the following agencies that serve the location:			
Fire Departs	ment: Rochester FD	Fax: <u>574-224-8380</u>	
Health Department: Fulton Co		Fax: <u>574-</u> 2 Fax: 574-2	
Child Prote	etion Service: Eulton Co.		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Trp. Mike Lorona</u> Phone <u>765-473-6666</u>			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.